



12 November 2002

Assistant Commissioner for Patents
Washington, D.C. 20231

Attn: Examiner Kim Lewis
Art Unit: 3761

VIA FACSIMILE: 703-305-3590

Re: U.S. Patent Application No. 10/056,251
"Process and Device for Application of Active Substances to a Wound
Surface Area"
Inventor: FLEISCHMANN
Filed: 24 January 2002
Group Art Unit: 3761; Examiner: LEWIS, K.
Attorney Docket No.: VAC.726A.US

Dear Examiner:

Applicant respectfully requests a revocation of all previous power of attorney and appoints practitioners at Customer Number 30159 as his attorneys to prosecute the above referenced application and encloses the following:

1. Transmittal Form (1 page);
2. Revocation of Power of Attorney (1 page);
- ~~3. Power of Attorney (1 page); and~~
4. This cover letter.

Please contact the undersigned at (210) 255-4543 for any reason that would expedite the allowance of the application. Thank you for your assistance.

Yours very truly,

A handwritten signature in dark ink, appearing to read 'Nadeem G. Bridi'.

Nadeem G. Bridi
Attorney for the Applicant
Reg. No. 42,361

Certificate of Transmission

I hereby certify that this correspondence is being transmitted to the United States Patent and Trademark Office, Fax no. (703) 305-3590 on November 12, 2002.

By: A handwritten signature in dark ink, appearing to read 'Nadeem G. Bridi'.
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PTO/SB/82 (10-00)

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**REVOCATION OF POWER OF
ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	10/056,251
Filing Date	01/24/2002
First Named Inventor	FLEISCHMANN, Wilhelm
Group Art Unit	3761
Examiner Name	
Attorney Docket Number	VAC.726A.US

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

☒ A Power of Attorney or Authorization of Agent is submitted herewith.

OR

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OR

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Individual Name

Address

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Telephone

Fax

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name

Wilhelm Fleischmann

Signature

Date

11.11.02

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 (one) forms are submitted.

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PTO/SB/81 (02-01)

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**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	10/056,251
Filing Date	01/24/2002
First Named Inventor	FLEISCHMANN, Wilhelm
Title	Process and device for application of active substances to a wound surface
Group Art Unit	3761
Examiner Name	
Attorney Docket Number	VAC.726A.US

I hereby appoint:

☒ Practitioners at Customer Number

OR

30159 →

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Name	Registration Number
Nadeem G. Bridi	42,361
William Quirk, IV	

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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Individual Name

Nadeem Bridi

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Telephone 210-255-4543

Fax 210-255-4440

I am the:

☒ Applicant/Inventor.
☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
SIGNATURE of Applicant or Assignee of Record

Name Wilhelm Fleischmann


Signature *W. Fleischmann*

Date 11.11.02

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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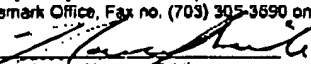
PTO/SB/21 (08-00)

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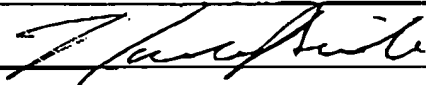
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/056,251	
	Filing Date	01/24/2002	
	First Named Inventor	FLEISCHMANN	
	Group Art Unit	3761	
	Examiner Name	LEWIS, Kim	
Total Number of Pages in This Submission	4	Attorney Docket Number	VAC.726A.US

ENCLOSURES <i>(check all that apply)</i>		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> 1. Cover letter
Remarks Certificate of Transmission I hereby certify that this correspondence is being transmitted to the United States Patent and Trademark Office, Fax no. (703) 305-3690 on November 12, 2002. By:  Typed Name: Nadeem Bridi		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Nadeem G. Bridi
Signature	
Date	12 November 2002

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